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## APPLICANTS

John S. Smyth, Milton, VT;  
 William H. Wagner, Essex Junction, VT;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 07/01/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> VT	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 31	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

24241

## TITLE

INDICATING NETWORK RESOURCE AVAILABILITY METHODS, SYSTEM AND PROGRAM PRODUCT

<b>FILING FEE RECEIVED</b> 1440	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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